



County of San Diego

DEVELOPER DEPOSIT CUSTOMER SERVICE UNIT

5201 RUFFIN ROAD, SUITE B
SAN DIEGO, CALIFORNIA 92123-1666
858-694-2320 Phone

DEVELOPER DEPOSIT REFUND REQUEST FORM

DATE: _____

CUSTOMER NAME: _____

CUSTOMER #: _____ REFERENCE #: _____

PHONE # (incl. area code): (w) _____ (h) _____

E-MAIL: _____

PROJECT LOCATION: _____

COUNTY PROJECT MANAGER: _____ Ph# _____

_____ This project is completed, I request a refund of any remaining funds on account.

_____ I wish to withdraw from this project, I request a refund of any remaining funds.

Please send refund to:

Person of Financial Responsibility: _____

Company Name (if applicable): _____

Address: _____

City, State, Zip Code: _____

Submitted by: _____ Date: _____

(Signature)

If you have any questions regarding completion of this form, please call 858-694-2320.

TO BE COMPLETED BY DEVELOPER DEPOSIT CUSTOMER SERVICE UNIT

Date Received: _____ Approved by: _____

Date Processed: _____ Processed By: _____

INSTRUCTIONS FOR DEVELOPER DEPOSIT REFUND REQUEST FORM

1. **Date:** Please enter the date the request form is completed.
2. **Customer Name:** Please enter the customer name as it appears on the developer deposit statement.
3. **Customer #:** Please enter the 4-digit customer number indicated on the top left of the developer deposit statement.
4. **Reference #:** Please enter the reference number indicated on the top left of the developer deposit statement.
5. **Phone #:** Please enter the customer's daytime work and home (if applicable) phone number(s). Please include area code(s) and extension numbers.
6. **E-Mail:** Please enter the customer's daytime e-mail address.
7. **Project Location:** Please enter the location of the project, including address, city, state and zip code.
8. **County Project Manager:** Please enter the name and phone number of the County Project Manager assigned to the project.
9. **Project Status & Refund Request:** Please check if the project is completed or the customer wishes to withdraw from the project.
 - a. **Project Completion:** Project completion means that all requirements have been met, the project permit has been issued, and inspection has been completed and approved.
 - b. **Project Withdraw:** A project withdraw must be with the mutual concurrence from the County Project Manager.
10. **Refund Mailing Address:** Refunds can only be sent to the person of financial responsibility on file for this project.
11. **Submitted By:** Please sign and date the Refund Request Form.
12. **Where to Submit:** The completed Refund Request Form can be hand-delivered or mailed to the following address (please no fax submittals):

**Department of Planning and Land Use
Developer Deposit Customer Service Unit
5201 Ruffin Road, Suite B
San Diego, California 92123-1666**